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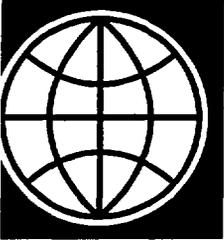
**TARGETING AT-RISK YOUTH
Rationales, Approaches to Service Delivery
and Monitoring & Evaluation Issues**

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I. INTRODUCTION

1. This paper stems from the need to develop a conceptual framework for analyzing issues affecting at-risk youth in developing countries and for determining investment priorities. The impetus for this analytical work came from the Government of Colombia, which has requested Bank assistance for addressing youth problems in the context of the proposed Bank-funded Child and Youth Development Project. Given relatively limited knowledge within the Bank and the growing importance of youth issues to many of our borrowers, it was decided that it would be useful to distill the international literature for best practice in:

- *Developing rationales and quantifying expected benefits of youth investments.*
- *Establishing a conceptual framework for analyzing and targeting at-risk youth.*
- *Delivering services in cost effective ways.*
- *Monitoring and evaluating youth programs.*

While most of the diagnostic material presented in this paper is derived from the international literature, the issues and approaches presented are generic and of relevance to Colombia and other Latin American countries. In parallel to this work, the Vice Ministry of Youth Affairs of the Ministry of Education is undertaking an assessment of the situation of youth and a review of youth programs in Colombia. It is anticipated that the complementary studies being undertaken by the Government and the Bank will form the analytical underpinnings for the proposed project.

2. The main audience for this report is the Government of Colombia, particularly technical staff and policymakers of the National Planning Department (DNP), Ministry of Education (MEN), and the Colombian Institute of Family Welfare (ICBF), as well as representatives of non-governmental organizations (NGOs) active in the provision of youth services. A secondary audience is the Bank management, which could usefully expand its knowledge of this area of growing concern to many borrowers. The study may also prove useful to staff embarking on preparation of similar projects and to other borrowers who face similar problems.

3. The rest of this paper is divided up into five sections. The second sets the background for addressing adolescent issues and for focusing on at-risk youth. The third section discusses rationales for investment in youths. The fourth presents a conceptual framework for defining and targeting youth at-risk; and uses the framework to describe the nature and magnitude of youth issues in the Latin American context. The fifth section reviews best practice, including design, implementation, and monitoring and evaluation of youth programs. The final section presents summary and conclusions. The paper draws on a number of background papers prepared by Colombian and international researchers.¹

1. These include: Targeting Adolescents: Empirical Evidence, Conceptual Issues and Rationales (Knaul and Florez, Universidad de los Andes); The Importance of Social Capital in the Creation of Human Capital (Patrinos, World Bank); Economic Justification for Investments in Youth (Thoumi and Rubio, Universidad de los Andes); Review and Analysis of International Experience with Programs Targeted on At-Risk Youth (Barker and Fontes); and Evaluating Programs for Vulnerable Children and Youth (Harrell, Urban Institute) (all 1995).

II. BACKGROUND

4. *Definition of Adolescence and Youth* The duration and defining characteristics of adolescence vary across time, cultures and socioeconomic situations. The adolescent period is one of psychosocial change through which individuals initiate a process of development and maturation of their personality, sense of identity, and capacity for abstract thought (Suarez Ojeda et al., 1985; Elliott and Feldman, 1990). During this period, adolescents form peer alliances, search for economic security and independence from parents, and develop values and attitudes. Critical decisions are taken which will ultimately influence earnings potential, well-being, marital patterns and childbearing (Monroy de Velasco, 1985).

5. While there is general agreement that adolescence is a developmental stage which begins at puberty (i.e. age at sexual maturity for boys and the onset of menarche for girls) there is more controversy about its end, with some experts suggesting that the upper limit may be as high as 25. Many countries and organizations use very broad age ranges, allowing for differences across disciplines and programs.² The Brazilian experience in defining a legal code for minors provides a good example of a clear and concise definition that distinguishes children from youth. The Childrens' and Adolescents' Act (*Estatuto del Nino y del Adolescente*, 1990) defines a child to be below the age of 11 years, a youth to be age 12 to 18, and a young adult to be over 18 and under 21. In Colombia, the Government's policy statement on youth makes the important point that each program should adopt particular defining criteria in accordance with the specific needs of the groups being served.

6. In Latin America, adolescence is increasingly recognized as a distinct period of the life cycle which has its own challenges, constraints and needs. Of particular concern is the large number of young people who continue to experience an abrupt transition between childhood and adulthood, often being forced to enter the labor market prematurely and ill prepared. For many of these youth, adolescence is a period of initiation into hardship and suffering. These youth require special attention to achieve the same opportunities for advancement in school, the labor market and personal development as others who do not face similar hardships. For the purpose of this paper, *at-risk youth* are defined as those who face environmental, social and family conditions which hinder their personal development and their successful integration into the economy and society. Young adolescents are defined as roughly 10-14 and older adolescents as roughly 15-19. Gender differentials are discussed throughout the paper, whenever relevant and feasible. The main focus of the paper is on urban-based youth (which was the key concern of the Colombian team), even though many of the issues discussed are equally relevant to rural youth. The following section turns to the question of *why invest in at-risk youth, with a particular focus on younger ages*.

2. Mexico (12-29) and Spain (15-29) have adopted inclusive views of the definition of youth. In Colombia, the Government's policy statements refer to children as less than 18 (*El Tiempo de los Ninos*, May 1995) while youth are defined as 15-25 and sometimes 12-25 (*Politica de Juventud*, June 1995). The United Nations and the World Health Organization include young people aged 10-24 or 15-24. Most countries define the legal age at which one is no longer considered a minor (often set at 18 or 21) and when one acquires several rights (voting, marrying without consent, participating in labor market without restrictions). A number of countries have set minimum age for entry into the labor force and restrictions on the number of daily working hours, according to the Minimum Age Convention (1973).

III. RATIONALES

7. Given the multiplicity of needs at various stages of the life cycle and the scarcity of public resources, it is important to establish a clear rationale for investments in youth in comparison to other priority groups and to determine a need for special programs targeted on at-risk youth rather than traditional social services. As more countries in Latin America move through the demographic and epidemiological transitions, the relative importance of addressing the needs of older children and youth is increasing. Demographic changes are resulting in a relative increase in the proportion of older people, placing serious pressures on the labor market and on social services. Since the youth of today will become the workforce that supports an aging population, it is necessary to ensure that they acquire the human capital to generate the income and level of growth necessary not only for their immediate welfare but also to support the older members of society. Epidemiological patterns reflect major reductions in transmissible diseases and the growing importance of violent deaths among youth and chronic diseases among adults. As discussed below, rationales for investing in youth are associated with different paradigms based on a number of goals: alleviating poverty and strengthening social capital; capturing externalities; and ensuring social justice and human rights.

Alleviating Poverty and Strengthening Social Capital

8. *While investment in human capital is essential, it is often not sufficient for reaching at-risk youth.* Empirical evidence has shown that it is often the lack of *social capital* which hinders young people from reaping the benefits of human capital investments. People begin life with endowments of nontransferable advantages at birth— *social capital*— which are conveyed by parental behaviors and attitudes. Lack of social capital has been defined in various ways: absence of stable family environments, supportive parental attitudes, community resources, networks and role models that facilitate coordination and cooperation for mutual benefit (Coleman, 1990; Putman, 1993). Social capital is embedded in relations among persons and is relatively intangible. Studies have shown that youth who suffer from lack of *good* social capital tend to fare poorly in school and have an increased probability of dropping out and experiencing lower returns to their schooling investments (Coleman, 1988; Smith, Beaulieu and Israel, 1992; Lichter, Cornwell and Eggenbeen, 1993; Garasky, 1995).³ Studies have documented the important effects of neighborhood peer influences on youth behavior. Youths residing in a neighborhood in which substantial fraction of young people are involved in crime or use illegal drugs have significantly higher probabilities of exhibiting analogous behaviors than do youths with similar family background and personal characteristics living in neighborhoods in which a small fraction of young people are engaged in such activities (Case and Katz, 1991). Empirical evidence from Latin America has documented that the educational climate of the household is one of the most important indicators of differences in educational attainment and the opportunity for social mobility among children and youth (CEPAL, 1993). Others have argued that during recent decades there has been a rise in *perverse* social capital, which is reflected in the consolidation of informal and illegal activities in environments which foster alternative forms of moral and

3. For example, Coleman has shown that students in one parent, 4 sibling homes, with no expectation of college attendance, have close to a 23 percent greater probability of dropping out of high school than those students in two parent, one sibling homes with mother's expectation of college.

social cohesion (Salazar, 1994; Thoumi and Rubio, 1995). While it is not surprising that students from relatively disadvantaged backgrounds tend to be low academic achievers, their situation underscores the importance of providing special assistance to promote equal opportunity.

Capturing Externalities

9. *Investing in young people may have spillover benefits for society to the extent that risky behaviors are altered, while neglecting to invest may have negative externalities.* Risky behaviors may include: early entry into the labor force, which adversely affects school attendance and has long run negative effects on earnings; consumption of drugs, alcohol, and tobacco, which in the short run, increases the probability of violence, accidents and poor school attendance and in the long run results in health threats; and early pregnancy, which often results in school drop-out, potential health problems, poorly paid jobs, and unstable unions.
10. Quantification of the potential public savings from averting risky behaviors can make a convincing case for action. An important literature exists for the United States. Cohen (1995) developed an econometric model for estimating the *potential* benefits from intervention programs designed to assist at-risk youth by estimating the social costs associated with the typical career criminal, drug abuser, and high-school drop out. The pivotal issue facing policy makers is *whether or not the benefits to society from an intervention exceeds its costs*. Based on a 2 percent (10 percent) discount rate, Cohen estimates that, in the United States, the typical career criminal causes US\$1-1.3 million (US\$0.7-0.9 million) in social costs; a heavy drug user causes US\$0.3-0.8 million (US\$0.2-0.4 million) in social costs; and the cost of a high-school drop out is about US\$0.3-0.5 million (US\$24,000-38,300). When taking into account possible duplication between criminals and drug users, the overall estimate of the monetary value of *saving* an at-risk youth is US\$1.5-2.0 million. As Cohen points out, this methodology is subject to a number of key shortcomings.⁴ Nevertheless, from a public point of view, it is essential to take into consideration the results of benefit-cost analyses since they can lead to opposite policy implications from what might appear 'intuitively obvious'. Burt and Levy (1987) estimated the savings of delaying a birth from age 15 to over 20 at about US\$7000, with the total savings over a 20-year period placed at US\$70 million. Using benefit-cost analysis to compare the benefits of saving these public funds to the costs of the preventive adolescent childbearing programs, they found that delaying a birth from age 16 to 18 would have saved the state about US\$7200.

4. These relate to uncertainties and data limitations on discount rates, rates of crime, reasonableness of monetized estimates of pain, suffering and quality of life, opportunity cost of offender's time. Likewise, it should be recognized that preventing a youth from embarking on a life of crime will not save society an equivalent amount, to the extent that the individual is 'replaced' by another (criminal opportunity theory).

Ensuring Social Justice and Human Rights

11. ***In addition to the economic arguments presented above, there are also important concerns with achieving social justice, and fulfillment of basic human rights, as well as social and political integration.*** The protection of the rights of youth is formulated as a goal in and of itself. The *Convention on the Rights of the Child*, adopted in 1989, marked the culmination of a series of efforts over several centuries to recognize a child's *right* to have *rights* (i.e. provision, protection and participation). The Convention provides an ethical, political and legal framework for efforts to guarantee the rights of children (i.e. defined as below 18 years of age). The adoption of the Convention was followed by a World Summit for Children, during which goals for the 1990s were articulated in National Action Plans. These plans emphasize the importance of providing assistance to young people in especially difficult circumstances (e.g. those exposed to violence, abuse, economic exploitation, drug use, sexual exploitation). Other relevant conventions have been ratified which single out the rights of youth, such as the *Convention on the Elimination of all Forms of Discrimination Against Young Women* (1979), which constitutes a major achievement of the U.N. Decade for Women and an important tool for policy makers and advocates for the rights of young women (Barker and Knaul, 1992). The Brazilian Childrens' and Adolescents' Act reformed the juvenile justice system from an institution that controlled children in 'irregular' situations to one that is responsible for guaranteeing the protection of their rights. Despite the normative value of international conventions and national legislation, the realization of the goals set forth in these documents is greatly dependent on political will. Large proportions of young people continue to live deprived of the rights that have been set forth on their behalf, signalling the importance of translating intentions into actions.

12. Investment in youth can guarantee that their interests are reflected in political decisions and in the allocation of resources, facilitating their political and social integration into civic society. Youth have often been the catalysts and political blocks in important political and social changes. The program of action of the International Conference on Population and Development highlights the importance of ensuring that youth participate in all spheres of society. This participation is a means of promoting the responsibilities that go along with the provision of rights. Guaranteeing young people participation in their family, community and schools is both a means of improving the quality of projects, and a means of giving young people necessary practice in developing the skills of decision-making.

Investing Early

13. ***While it is generally recognized that vulnerable youth face a continuum of risks and needs at various stages of the life cycle, the scarcity of resources suggests that Governments have to direct public resources where the returns will be the highest. Experience has shown that investing early in preventive programs for children and younger adolescents is the best strategy to adopt, rather than waiting for the onset of serious problems.*** This does not imply that Governments should not be concerned with the serious problems (e.g. lack of employment opportunities) facing older adolescents and young adults in many developing countries. It simply suggests that there is a need to intervene early when critical decisions are taken which will determine future well being, and when the seeds of later adult behavior are planted. In later periods of the life cycle it becomes exceedingly difficult and costly to reverse anti-social behavior patterns. The importance of integrated early childhood interventions in improving school readiness, increasing returns to education,

reducing social welfare costs and stimulating community development has been well documented.⁵

14. Likewise, numerous studies from developmental psychology have documented the importance of investing during the late childhood and early adolescent years (i.e. 9-12 or 10-14) in order to prevent life-long cycles of self-destructive and anti-social behavior and mitigate the damage caused by harmful environment. While the majority of this empirical evidence comes from the developed world, anecdotal evidence suggests that there are similar patterns in many areas of Latin America. Some have argued that "the foundations for violence are organized in childhood and activated in adolescence." (Earls, 1991)⁶. Other studies have shown that adults who suffered abuse and neglect as children tend to repeat such behavior with their own children. Empirical evidence has also shown exposure to sexual abuse among young women to be a precursor to teen pregnancy, since girls who feel no control over their bodies are likely to feel powerless to control their reproductive and sexual choices later in life.⁷ The patterns of emotional and psychological development during adolescence heavily influence whether a girl reaches womanhood with high self-esteem, which in turn affects educational attainment, and income generation opportunities as well as childbearing and childrearing. The next section presents and uses a conceptual framework for analyzing the complex and interrelated set of problems facing youth in Latin America.

IV. CONCEPTUAL FRAMEWORK

15. The conceptual framework presented in Figure I represents a useful analytic tool for analyzing problems facing young adolescents and for suggesting the most critical factors to be used in targeting interventions.⁸ The framework synthesizes the diverse literature on adolescent development, problems of adolescence and theories of prevention. It emphasizes the early signs of dysfunction rather than the onset of destructive and anti-social behaviors. As the authors explain, the model represents an over-simplification of the complex inter-relationships between causes and effects. It attempts to reflect "... a confluence of factors, including increased vulnerability, multiple causation, and the transaction between the environment and the individual". The model has been applied to describe the situation of 10-15 year olds in the United States. Many of the problems encountered by these youth are very similar to those of comparable or probably even younger youth in urban areas of Latin America: dropping out of school, drifting away from their families, working and/or living in the street and experiencing conflict and stress. The framework uses the following components of risk:

5. Young, Mary Eming, Strategies for the Development of Young Children, World Bank, December 1995.

6. A study commissioned by the Carnegie Council on Adolescent Development in the United States concluded that violent behavior among youth does not "... drop out of the sky at age 15" but reflects a pattern that begins at young ages with minor delinquency and drug abuse (Carnegie, 1994).

7. A 1989 study of 445 teenage mothers in the U.S. found that nearly two-thirds reported sexual abuse, with an average age at first abuse of 11.5 years. (Musick, 1994).

8. The framework is drawn from Resnick, Burt, Newmark, and Reilly, Youth at Risk: Definitions, Prevalence, and Approaches to Service Delivery, Urban Institute, July 16, 1992.

- **Risk antecedents** are environmental conditions such as poverty, neighborhood environment and family dysfunction which predict subsequent negative outcomes.

- **Risk markers** are behaviors or conditions associated with more serious outcomes. Poor school performance and involvement with child protective services are critical markers for which data are usually available.

- **Problem behaviors** are defined as activities that have the potential to hurt youth and/or the community. These behaviors are most likely to occur in youth who displayed risk markers in the past or who were living under risk antecedent conditions and include: absence from school, association with delinquent peers, running away from home, early use of drugs, tobacco and alcohol and unprotected sexual intercourse.

- **Negative outcomes** are conditions that have negative consequences for a youth's future development, such as school dropout and premature entry in the labor market; delinquency; homelessness; drug addiction; teen pregnancy; prostitution; physical and sexual abuse. Many of these negative outcomes are of particular concern to society because of the high socio-economic costs associated with these behaviors and since children born in households where early childbearing, abuse and violence occur tend to contribute to the intergenerational reproduction of poverty.

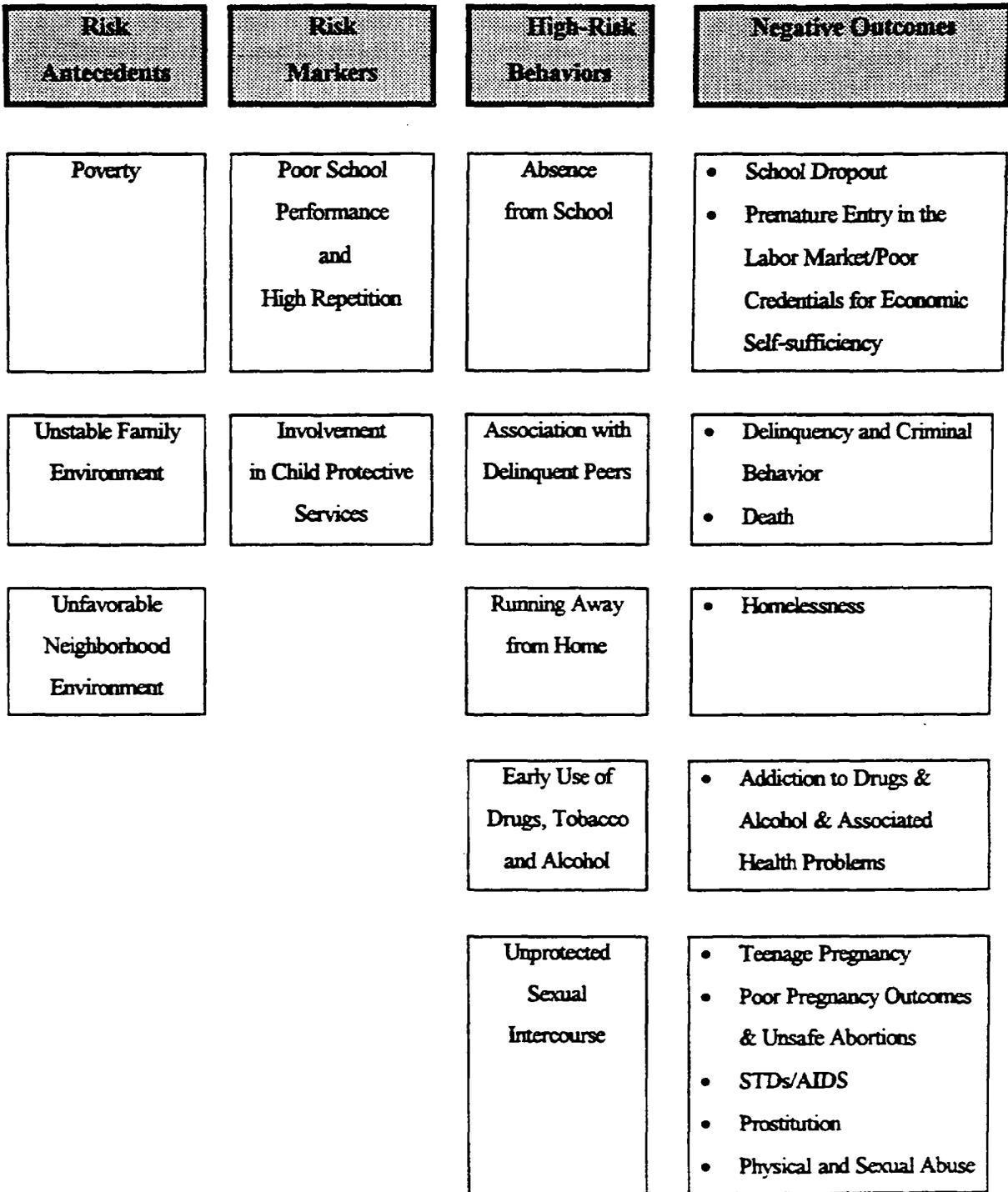
Situation of Youth in Latin America

16. **Risk Antecedents** The serious economic problems experienced in Latin America during recent decades and especially during the 1980s have led to an increase in poverty. By the early 1990s, close to 40 percent of all households were below the poverty line and the mean per capita income of poor households was 45 to 55 percent below the value of the poverty line in Bolivia, Colombia, Honduras and Panama (CEPAL, 1994). Accelerated urbanization has placed considerable pressures on social services and on labor markets, which has contributed to the growth of the informal urban sector. *These socioeconomic changes have also meant changes at the level of families and households with profound effects on youth:* a higher proportion of adolescents living in female-headed households, where women often work outside the home; increased vulnerability to poverty; mounting pressures to fill adult roles and supplement family incomes, reducing the time for schooling; and declining socialization capacity of families. The rapid urbanization process has contributed to the *concentration of poverty in large cities*, where large numbers of youth live in marginalized neighborhoods characterized by high unemployment, crime, and social problems and the disintegration of traditional forms of social cohesion.⁹ As discussed below, the changing social and economic conditions in Latin America have created a central dilemma for young women, who face competing demands of family and outside work.

9. The countries with the greatest urban growth between 1960 and 1990 were: Brazil, Martinique, the Dominican Republic, and Trinidad and Tobago (where the urban population increased by more than 30 percent), followed by Colombia, Cuba, Ecuador, Honduras, Mexico, Nicaragua, Peru, Puerto Rico, and Venezuela (where the urban population increased by more than 20 percent).

FIGURE I

A CONCEPTUAL FRAMEWORK FOR ANALYZING AND TARGETING YOUTH AT-RISK



17. **Risk Markers** At the beginning of the 1990s, the percentage of 7 to 14-year olds from low-income households who had fallen behind in their studies was between 10 and 40 percent higher than among those coming from high-income households. For example, in 1990 in urban areas of Brazil, one out of every two poor children had fallen behind, in comparison to one in ten in the top quartile of the income distribution. A second marker in early adolescence is whether a young person is involved in child protective services as a result of the adolescent's behavior or family breakdown and crisis, typically involving domestic violence, child and sexual abuse, or parental criminal conviction.

18. **Negative Outcomes**

- **High school drop out** The proportion of young people who drop out of school before having completed basic education (i.e. 9 or 10 years) remains high in Latin America. In urban areas, the percentage of young people aged 20-24 who left school after completing nine years of study or less, fluctuates from 20 percent (Chile) to 54 percent (Honduras). For young people in the bottom quartile of the income distribution this percentage is substantially higher (40-80 percent) and for those in rural areas it is the highest (70-96 percent). Worldwide evidence has shown that assisting youth to remain in school, with a particular focus on girls, is probably the single most important measure that Governments and communities should concentrate on since it will preempt most of the other negative outcomes discussed below. Empirical evidence has documented that dropping out of school before completing the primary cycle results in 24 percent lower earnings over a life time as well as lower productivity in the future.¹⁰ Experience has also confirmed that better educated and informed women postpone the age at which they begin to form families and have fewer children; place a higher priority on children's education; and tend to be better prepared to enter the labor market.

- **Premature entry in the labor force** Early entry into the labor force is a factor in the lives of adolescents that adversely affects school attendance and human capital formation. Working young people have lower rates of school attendance and educational attainment than their non-working counterparts. In Colombia, for example, 41 percent of working males age 12 to 14 attend school; by contrast, 91 percent of those who do not work attend school. In most countries, the percentage of urban working children aged 12-14 is greater in indigent and poor households than in relatively well off households. Psacharopoulos and Arriagada (1989) found that in Brazil the probability of dropping out of school increases with age and the fact that a child works. Using retrospective data from Bogota, Knaul (1995) finds that for youth, dropping out of school at any age to work has negative effects on the earning patterns as adults. While boys tend to drop out to go into paid work, girls often abandon school to undertake unpaid work in their home, in an effort to release their mothers for employment. In Colombia, close to 32 percent of adolescent women 12 to 14 list unpaid housework as their principal activity (Florez, Knaul and Mendez, 1994).

¹⁰ For example, in the United States, high school dropouts cost about US\$237 billion in 1970 in life time earnings (Levin, 1979).

• ***Delinquency and criminal behavior***

While regional data on juvenile delinquency are not readily available it is well recognized that rapid urbanization combined with worsening socio-economic conditions has created a conducive environment for juvenile delinquency, a problem which tends to involve primarily males. In Colombia since the beginning of the 1970s, drug trafficking has been on the rise, and has led to territorial wars that bled poor neighborhoods, as reflected in the predominance of homicides as the leading cause of death. Salazar presents an insightful analysis of the *sicarios* or paid killers in Colombia, which is similar to that in other Latin American cities, where drug dealers have formed armies of adolescents in shantytowns to safeguard their territories (box 1). It is important to point out that many or most youth who grow up in poverty do *not* end up as juvenile offenders. This finding from the American literature probably also mirrors the situation in Latin America, where *resilient* children who live in at-risk situations emerge from this vicious cycle of poverty. This suggests that programs need to use a population estimate based not only on poverty but on other risk factors, which is likely to limit the target group considerably.

• ***Homelessness*** The plight of *street children* in Latin America and the Caribbean has received increased

attention in recent years. While many of these youngsters are not actually homeless, others have strayed away from their families or been abandoned by their parents and most spend a good deal of their time living and working in the streets. Most homeless youngsters are boys. Nevertheless, many girls also belong to street gangs or use prostitution as a vehicle of escape. Estimates of the numbers of street children range into the millions in Brazil and are also relatively high in Argentina, Peru, Mexico and the Dominican Republic. In Colombia, Knaul has placed the number of street children at about 15,000. The perceptions of street children in Brazil has changed dramatically. While these youngsters used to be seen as street-wise, economically enterprising and resourceful, they are increasingly viewed by society as a public scandal and a nuisance or as "marginals". By contrast, in their own

Box 1: *Young Assassins of the Drug Trade*

"For the children of Medellin, drug trafficking brings the fantasy of wealth and the reality of death. First it becomes normal to witness killing and dying; then, to kill and to die."

Salazar argues that to understand the suicidal attitudes of these young boys one must analyze the society that produces them. The gangs emerged in areas characterized by massive rural migration where residents were condemned to the world of "informality" with the rights and obligations of citizenship often lacking. These youth grew up in environments that lacked moral, social and cultural prototypes and binding principles which might have given them respect for one another and for life itself. With the family and school losing their socialization functions, the youth often turned to gang leaders and drug lords to provide alternative role models. The exercise of violence thus becomes one way of getting society to acknowledge their existence. The subculture of violence promotes an alternate notion of good and bad and protects members from an attack on their self esteem.

environment, the very notion of a 'street child' does not exist. These youngsters are vulnerable to the worst forms of exploitation, abuse and manipulation.

• ***Drug addiction, alcoholism and associated health problems*** The consumption of psychoactive substances has increased in Latin America.¹¹ Drug use is particularly prevalent among certain groups of youth, such as street children and young women who suffer sexual abuse in prostitution.¹² Economic models of drug use have attempted to show that use and addiction among extremely vulnerable youth, such as street children, reflects their low perceptions of life expectancy and the hardships they suffer, which often skews their time preference toward the *here and now*. For these young people the present value of the future costs are severely reduced. Drug addiction and alcohol consumption/abuse among adolescents has both short and long-run risks and may be the result of many factors, including peer pressure, social, economic, psychological or family factors.¹³ The consumption of drugs, alcohol and tobacco constitute behavior patterns that affect human capital formation among adolescents. The abuse of alcohol and drugs may affect school attendance and the adolescent's capacity to learn. Psychoactive drugs can cause immediate health dangers as well as long-run damage. The effects of alcohol can be acute (intoxication, a state which leads to accidents and violent behavior) and chronic (disorders of the central nervous system).¹⁴ Smoking during adolescence increases the risk of cancer in adult life and for pregnant women it is associated with reduced birth weight and premature births (Senderowitz, 1995).

• ***Teenage Pregnancy*** Adolescents who initiate unprotected sexual activity early (i.e. before the age of 15) constitute a particularly vulnerable group since they are at greater risk of pregnancy and its associated negative outcomes: obstetric complications, maternal mortality, low educational attainment and limited job opportunities, which in turn can adversely affect the welfare of their children. While adolescent parenthood has an effect on fathers the principal costs are born by females. The proportion of girls with sexual experience before the age of 15 is substantial, although significant differences are found among countries: from 12 percent in

11. In Brazil, for example, the use of inhalants among primary school children has been on the rise since the 1970s; a 1987 survey found 27 percent of schoolchildren in 10 cities had used drugs and 19 percent had used solvents.

12. In Colombia, drug use is very common among the *gamines* who often start at very young ages. Knaul (1994) finds that at least 75 percent of them use at least one of marijuana, glue or bazuko with the average age at initiation of 10 years; the use of harder drugs begins at 12 years.

13. For Colombia, Thoumi documented that drug addiction seems to have an important relationship to family structure, with the probability of addiction being substantially lower if a person comes from an intact nuclear family. In the case of Chile, Florenzano and Medina (1985) showed that the main motivation to drink alcohol for the first time is to imitate family conduct, followed by peer pressures with heavy drinkers frequently having an antecedent of alcoholism in a family member.

14. In Chile, Florenzano and Medina (1985) show that the abuse of alcohol increases mortality among youth from accidents and violence. Almost 64 percent of all deaths between the ages of 14 and 25 registered high levels of blood alcohol levels.

Mexico to 30 percent in Jamaica. Young men are much more likely than young women to begin their sexual lives at a very early age.¹⁵ In total, roughly one-half of women in Latin America and the Caribbean have had a sexual relationship by the time they reach age 20. As in many other countries, women who achieve more education and have higher work aspirations are less likely to become sexually active as teenagers, highlighting the importance of providing basic education to girls.¹⁶ Empirical evidence has shown generally low levels of contraceptive use among unmarried adolescents.¹⁷ While many researchers have characterized early sexual initiation as risk-taking behavior related to the uncertain and sporadic nature of sexual relationships (Singh and Wulf, 1990), it should be recognized that in some situations adolescents regard early childbearing as a way of raising their status in society (Wartenberg, 1994).

With the general decline in fertility, particularly for older women, and higher numbers of teenage women, the number of babies born to teenagers has been increasing in absolute and relative terms in many Latin American countries. In some countries, as many as 40 percent of the pregnancies occur in adolescents under 18. These young women have between 2 and 3 children more than those who begin their families after age 20. Adolescent mothers constitute an especially vulnerable group since most do not get married but live either in extended households (i.e. as 'hidden' heads of household), incomplete nuclear families or consensual unions, which have a high probability of ending in dissolution with negative implications for the children.¹⁸ Adolescent mothers below 17 have a higher risk of obstetric complications and maternal mortality than those over 20. Pregnant teens with limited resources sometimes also face the high risks of illegal abortions.

15. For example, data from the Young Adult Surveys in various Latin American cities (e.g., Guatemala City, Sao Paulo, Salvador) showed that the proportion of boys who had first intercourse before the age of fifteen was over 30 percent in comparison to 8-14 percent for girls; the comparable figures for those under twenty were 80 and 40 percent, respectively.

16. In Colombia, the Dominican Republic, Guatemala and Mexico, women with 10 or more years of schooling are 3-4 times less likely than those who have received only four years to begin their sexual lives in their teens. Results from Demographic and Health Surveys illustrated that of the women aged 20 to 29 who had delayed childbirth until after the age of nineteen 38 to 82 percent had completed primary education in comparison to only 19 to 67 percent who had a child before nineteen. In Brazil, 8 percent of adolescent mothers versus 27 percent of those who delayed birth had achieved 10 or more years of schooling.

17. For example, in Colombia, two-thirds of single sexually active 15-19 year olds had never used a contraceptive method while in Brazil, 80 percent had not practiced any method of birth control at the time of first coitus.

18. In the late 1960s and early 1970s approximately one-half of teenage unions in Colombia and Peru were consensual; by 1986, this proportion had increased to almost two-thirds. Word Fertility Survey data for Colombia in the mid-1970s indicates that 20 years after the first union 63 percent of consensual unions, compared with only 13 percent of legal marriages dissolved.

• **Prostitution** There is anecdotal evidence that a sizable number of young women in Latin America and the Caribbean are involved in prostitution, which leads to high physical and psychological damage. Barker and Knaul (1992) report an average age of women involved in prostitution of 24 years, with most having started working in their mid-teens. The Brazilian Center for Childhood and Adolescence estimates that there are 500,000 girl prostitutes nationwide. Dimenstein (1994) has documented the experience of young girls who are swept up into the Brazilian Amazon prostitution racket by promises of employment and are subsequently forced into prostitution. Factors driving these women towards a life of prostitution include risk antecedents such as extreme poverty and dysfunctional family environments (e.g. alcoholism, sexual and physical abuse and broken homes). Girls suffer increased risks of exposure to STDs, pregnancy and violence, including self-mutilation which is a common form of self-punishment. A recent census in the central part of Bogota found almost 3,000 girls and young women between the ages of 9 and 17 years involved in sex shows and prostitution; over 45 percent of the young women surveyed said they went to live on the street and entered *galladas* (groups of street children who live together on the street) upon leaving their homes (Camara de Comercio, 1993).

19. In summary, a number of key points should be emphasized with regard to the application of the framework prior to proceeding with a discussion of possible interventions for addressing the issues described above:

(i) The framework represents a useful analytic tool for categorizing and assessing the problems facing youth. Given scarcity of resources, it will be critical to analyze the salient characteristics of particular situations and to identify the principal intervention(s) which will have a maximum effect in preventing negative outcomes. Worldwide evidence suggests that *assisting youth to remain in school and receive quality instruction*, with a particular focus on girls, is probably the single most important intervention that Governments and communities should concentrate on since it will preempt many or most of the other negative outcomes, such as premature entry in the labor market, delinquency, addiction and teenage childbearing.

(ii) The framework suggests the need for *early detection and prevention*. The basic goal is to reach at-risk youth 'before' the negative outcomes occur. Depending on the resources available and the scope of the proposed program, targeting must be based on a combination of risk antecedents and risk markers. A population estimate based on poverty and neighborhood alone is likely to include many more youth in the risk pool than will ever go on to experience negative outcomes. On the other hand, an estimate which includes those factors, in addition to unstable family environment and poor school performance is likely to limit the target population considerably and to make it more manageable and financially feasible to reach those at greatest risk.

(iii) The framework highlights the importance of dealing not only with the symptoms of adolescent problems but also *addressing the underlying causes or contributing factors* (poverty, unstable family environment, unfavorable neighborhood environment). As discussed in the following section, successful youth programs tackle these issues in an integrated fashion, often targeting not only at-risk youth but also their families and/or communities.

V. BEST PRACTICE IN PROGRAMS FOR AT-RISK YOUTH

Program Design and Implementation

20. Since the early 1980s, there has been a tremendous growth in government and non-governmental efforts to assist youth in at-risk situations. Many of these programs reach relatively small numbers of youth, are highly variable in quality, and tend to focus on individuals who already exhibit problem behaviors. This section turns to a discussion of best practice in their design and implementation. It is based on a review of two dozen international programs for urban-based low-income youth, which was the immediate concern of the Vice Ministry of Youth Affairs in Colombia. The geographical coverage is limited and does not pretend to be exhaustive. Priority was given to a cursory review of a broad number of programs rather than an in-depth look at a few programs.¹⁹

21. The approach adopted in the background paper by Barker and Fontes uses a three-tiered definition of risk and of addressing needs, which is broadly consistent with the conceptual framework presented in the previous section. *Primary prevention* programs typically target youth who are still in school and living with their families but are at-risk because of environmental, familiar and social factors which might compromise their healthy development. *Secondary prevention* programs provide assistance to youth with early evidence of the onset of problems. *Tertiary attention* programs provide treatment and remediation for those experiencing negative outcomes and often involve out-of-home care or alternative living situations. While the programs are categorized into three broad groups, it should be recognized that, in practice, the distinctions are often blurred with programs providing a combination of preventive and tertiary services.

22. The majority of the programs included in the Barker and Fontes report represent government-NGO partnerships. They include examples of government contracting and subsidizing youth services via non-governmental organizations. Most governments in Latin America have recognized the comparative advantage of many NGOs in providing low-cost and high-quality services to at-risk youth. Moreover, it is also recognized that NGOs tend to provide these services in a culturally and developmentally sensitive manner, often allowing for greater youth and community participation. NGOs that run programs which benefit from government funding have generally had a greater chance of success and sustainability. While NGOs have often taken a lead in the delivery of services to youth, Governments continue to play pivotal normative functions. A strong state role has been recognized and affirmed in terms of setting national youth policies, funding programs, taking legal decisions on behalf of youth in difficult circumstances, establishing and enforcing minimum standards for NGOs, and delivering services where there are market failures (e.g. operating centers for youth offenders). In general, a model based on Government/NGO partnerships tends to optimize the comparative advantages of both the state and the NGOs.

19. For a discussion of the case studies the reader is referred to the background paper, which summarizes key strategies, problems encountered, main accomplishments, costs, financing and efficiency and lessons learned for each program. Review and Analysis of International Experience with Programs Targeted on At-Risk Youth, Barker and Fontes, August 1995.

23. Prior to proceeding to a discussion of "successes" and lessons learned a number of caveats must be raised with regard to assessing the 'impact' and 'cost-efficiency' of these interventions. First, most programs do not have the human and financial resources necessary to undertake research and hence have often not benefitted from evaluations. Second, while cost data are typically available, they are usually seriously deficient, unreliable and potentially misleading, making interpretations subject to error. Main reasons include: fluctuations in the number of beneficiaries; lack of disaggregated data by service; and importance of in-kind contributions. Moreover, cost-per-youth figures are also highly dependent on whether programs target relatively motivated youth or those hardest to reach. Third, most programs do not collect information on the 'benefits' side, making it difficult to reach conclusions about their effectiveness and cost efficiency. Finally, comparisons amongst programs are rendered difficult by the fact that they often do not provide comparable packages of services. In general, preventive programs tend to be less expensive than secondary and tertiary ones, which often involve individualized attention, smaller case loads and/or residential care but there are notable exceptions. With these caveats in mind, the remainder of this section describes key features, successful elements and lessons learned.

24. *Primary prevention programs* These programs include: school drop-out prevention; job placement, vocational orientation and life skills; vocational training and income generation; health promotion; and social integration and political participation.

- *School Drop-out Prevention* It is well recognized that it will be essential— but probably not sufficient— to continue making strides in improving the quality and coverage of basic education as well as facilitating access through direct subsidies to the poor. Simultaneously, it will be important to explore creative pedagogic techniques for reaching at-risk youth and for providing complementary assistance to improve school retention and to encourage critical thinking. School drop-out prevention models which support rather than place extra burdens on the public school system seem to have a higher chance of success. The Cities in School program (Box 2) represents a good model of collaboration since it provides parallel support with separate funding and administration from that of the public school system. By contrast, programs located within the school system have often overburdened already fragile public school systems and yielded generally limited results.²⁰ Community-based programs, which involve partnerships between the schools and community institutions (including local businesses) have proven effective in some situations.²¹ The following elements were found to be common to successful programs: early intervention; small school size; individualized attention; identification, sustained counseling and monitoring of youth; program autonomy and flexibility; and parental involvement (Dryfoos, 1990; Mazur and Thureau, 1990).

20. School-based interventions include: remedial programs for low-achieving students; structural reorganizations; counseling and specialized services (tutoring, psychological services); full-service schools; and alternative schools for those who do not fit into the mainstream. In one review of eight alternative school for at-risk youth in New York City, Foely and Crull (1984) found that students were performing better academically, with higher attendance and completion rates, cited in Resnick, et. al. (1992).

21. The best known of these projects in the U.S. is the STEP program (Summer Training and Employment Program), which involves intensive remediation, life-skills training and part-time job placement.

• ***Job Skills and Vocational Training***

The best combination of vocational orientation and vocational training for at-risk youth involves a partnership between an NGO or community organization, which often understands the needs of youth, and industry, which provides on-the-job training. Industry linked or industry-based vocational training helps ensure high placement rates (SENAI).²² Moreover, programs have found that employers often value vocational *orientation* more than the *training*. In Trinidad and Tobago, for example, firms which employ Servol graduates do not view vocational training as a requirement for employment but prefer youth who are punctual, hard-working and have positive work habits. An important feature of innovative vocational training programs is that they work with youth to overcome traditional gender stereotyped training.²³ Promising programs provide stipends to trainees to prevent them from dropping out prematurely for economic reasons as well as follow-up support.

Box 2: *Cities in Schools* is a national umbrella NGO in the United States that provides technical assistance for establishing community-based projects to assist at-risk secondary school children from dropping out of school. Since its inception in 1977, the program has been expanded from a pilot project to nationwide scale. Notable results have included higher school attendance, improved academic performance and enhanced self-esteem. The CIS model consists of developing individualized case plans and providing guidance counseling for at-risk students and using a collaborative strategy of local partnerships between government, NGOs and community businesses. While the national headquarters handles coordination and training local institutions are responsible for program management. The central tenets of the program are: fostering a personal relationship between each youth and a caring adult; ensuring autonomy, accountability and participation of local communities; using community volunteers to keep costs down; and promoting service integration. The annual cost per beneficiary varies between US\$1,000 and US\$2,600, including in-kind contributions. By comparison, the annual cost of secondary education in the U.S. is about US\$6,300 (1991).

22. A 1993 study of the basic vocational training for youth in Sao Paulo found that upon completion of their programs, 51 percent had started an apprenticeship in a firm, 29 percent already had work guaranteed before entering the SENAI program and the remainder were looking for an apprenticeship.

23. A case in point is the Servol program in Trinidad and Tobago, which gives priority to youth who wish to train in trades which are traditionally relegated to the opposite sex, diminishing sex-role stereotypes.

• **Health Prevention and Promotion** The most successful school-based programs involve life skills training to learn problem solving and assertiveness (*Como planear mi vida*²⁴). Other school-based interventions include the provision of special services and counseling and the establishment of school-based clinics, which offer comprehensive health care services to adolescents.²⁵ Community-based interventions provide outpatient and/or outreach services, often mobilizing community leaders, parents, resource people (University volunteers), and peer promoters and establish referral networks to cope with the demand for health services (*Unidade Clinica de Adolescentes, Brazil; Programa Integral de Salud y Desarrollo Juvenil en el Area Oriente de Santiago, Chile; Addiction Alert*).²⁶

Key features which have been shown to increase acceptability and utilization of health services targeted to adolescents include: (i) early intervention; (ii) package of comprehensive services which integrates the perceived needs (life-option, income generation and violence prevention activities) of youth with health issues and are provided in a confidential manner by well-trained staff who are sensitive to the special needs of adolescents; and (iii) use of peer mentoring strategies for disseminating health messages in settings most frequented by adolescents. While programs which cater exclusively to youth have overcome the reluctance of adolescents to use public health services, they are not easily replicable in most contexts in Latin America due to their relatively high costs; this underscores the need for strengthening the referral system, making contractual arrangements with other service providers, and/or developing separate wings or entrances in traditional public health facilities. Finally, while many programs report improvements in knowledge and attitudes, this has not necessarily led to behavioral changes.

• **Social Integration and Political Participation** Successful programs, which aim to integrate marginalized youth socially and politically have realized that youth who feel invested or connected to their communities are less likely to be destructive and violent toward other community members and towards themselves. These programs have shown that it is essential to design programs *with* and *by* youth rather than for them. The *Vicaria Zona Norte* Program in Chile offers a good example of a low-cost program which involves community groups, the church, youth and adults in carrying out activities with and by youth to improve their developmental outcomes and help them feel more connected to and integrated in their community (box 3). International experience with youth-serving programs has emphasized that while recreational activities are important they are not sufficient; successful programs have also found creative ways of fostering self-esteem and critical thinking as well as constructing relationships with hard-to-reach youth.

24. 'Como planear mi vida' is a participatory, non-formal methodology and training program in sex education, teen pregnancy/drug abuse and STD prevention, which was initially used in the U.S. and subsequently adapted to many countries in Latin America.

25. In the United States, Jorgensen (1991) found school-based clinics to represent the most effective model of pregnancy prevention.

26. The Addiction Alert program in Jamaica has shown that youth are more likely to listen and internalize messages related to health promotion if received from their own peers.

25. **Secondary prevention programs** These programs aim to: (i) prevent child abuse (Healthy Families Houston and Hawaii Healthy Start, U.S.); (ii) deter young women from getting involved in prostitution through the provision of educational and cultural activities and viable income generation alternatives (*Coletivo Mulher Vida, Conselho Estadual dos Direitos da Mulher*, Brazil; Daughter's Education Program, Thailand); (iii) improve working conditions, income generation possibilities and survival skills of working children and youth (CEDIC, SODIFAG, Guatemala; Undugu Society, Kenya). Many of the lessons learned from these programs are similar to those in primary prevention. One major difference is that youth in situations of secondary risk are sometimes harder to reach. Key features which are unique to these programs include:

- (a) Use of the family as the locus of attention and not just the individual youth, which recognizes the importance of addressing risk antecedents such as difficult or dysfunctional family environments.
- (b) Use of costly needs assessment and detection techniques, which have proven effective in screening potential clients and targeting interventions.
- (c) Reliance on caseworkers or outreach workers to provide services in the home, community or place of work and use of collaborative arrangements among various social service agencies.
- (d) Provision of alternatives to institutionalizing or removing children from the home and placing them in residential care.

26. **Tertiary attention programs** Youth in situations of tertiary risk need protective, rehabilitative and/or intensive services that remove them from harmful situations. The programs reviewed aim to provide support to youth involved in prostitution and/or living in the streets (*Casa de Passagem, Projeto Axe*, Brazil); and to adolescent mothers (Women's Centre of Jamaica; The Ounce of Prevention Fund, USA). The Jamaica program targeted to teen mothers is worthwhile noting because of its proven track record (Box 4). Interesting features and/or lessons learned from these programs include:

- (i) Use of multi-phase assistance to street children, which includes in the initial phase, reaching out to them; subsequently, providing drop-in counseling, literacy and health services; and finally providing residential group homes and vocational training. Many programs establish benchmarks and incentives for street children to progress from one phase to the next, signalling increased levels of responsibility and independence.

Box 3: *Vicaria Zona Norte* is a recreational outreach program for children and youth living in low-income communities in Santiago. The program trains older youth and community adults as peer counselors and coordinators of recreational activities. Focus group discussions are used to determine the needs of the communities and plan appropriate activities. The program also aims to raise awareness and change behavior with regard to treatment of children. Anecdotal information suggests generally positive results with important indirect benefits, such as improved leadership skills and sense of civic responsibility. The annual cost per youth is about US\$240 equivalent.

Assistance often involves establishing a positive relationship with a staff member and group activities to create solidarity and support. Special efforts are made to lobby businesses in order to overcome the stigma associated with recruitment of former street children.

Successful programs stress the importance of critical thinking and independent behavior rather than perpetuating their dependence on the welfare system.

(ii) Diversification of the services provided by including preventive measures, which involve use of former street children and adolescent mothers to provide peer support and counseling.

(iii) Need to avoid costly residential shelters by using community-based group homes.

27. **Integrated Programs** These programs are intended to address the shortcomings of single-theme traditional programs, such as fragmentation, limited capacity, poor access, and inappropriateness of services. Traditional programs often deal only with youth, rather than addressing the multiple needs of their families and their neighborhoods (Ginzberg et al., 1988). As explained in Resnick, et. al. (1992), there are three facets to integration: the need to provide a full range of services (*comprehensiveness*); to ensure sufficient *service levels*; and the ability to assure that clients receive the services needed irrespective of the service provider (*service integration*). The Children at Risk Program in the United States is a good example of an integrated program (Box 6) The main features of service integrated models can be summarized as follows:

- A *holistic approach* which views each youth both individually and as part of a family or neighborhood and community. Many service integrated programs use a community-based approach, flexibility in meeting local needs, and attention to the larger context of client problems in family, neighborhood and community, recognizing that for preventive efforts to work they must also address underlying causes.

Box 4: Jamaican Women's Centre

This successful program, which provides assistance to pregnant girls to return to school and to avoid subsequent pregnancies, has been adapted and replicated throughout the Caribbean and Africa. Services include academic instruction, counseling, and skills training, as well as child care, parenting skills training, and family planning services. A recent evaluation revealed that, in comparison to a control group, girls who participated in the program had a better chance of returning to school (about 60 percent returned versus only 14 percent of the control group); enjoyed a higher probability of graduating and earning higher salaries (i.e. salary levels were 72 percent higher among participants); and were more likely to avoid subsequent pregnancies (i.e. only 15 percent of recent graduates had another pregnancy in contrast to 40 percent in the control group). The program has also made a major effort to lobby policymakers and the public in order to change negative attitudes associated with pregnant schoolgirls. The unit cost per beneficiary is about US\$300 equivalent per year.

- An opportunity to attract youth to *self-enhancing activities* and to engage the community in goal-setting and program design. Pittman and Cahill emphasize that rather than simply working to avoid risk, self-enhancing activities give youth the opportunity to solve their own problems by helping themselves, their family and their community. They encourage empowerment efforts by focusing on strengths, potential for leadership and potential for making contributions beneficial to others.
- A comprehensive and *individualized initial assessment* for each youth and family; and development of a *coordinated service plan*.
- *Institutionalized interagency linkages* are established that ensure that service referrals result in effective service delivery. Integrated service systems are based on tripartite collaborative arrangements among: (i) government organizations, which typically assist in funding and normative functions (setting standards, establishing management information systems, assisting in monitoring and evaluation, nurturing community and political support, coordinating efforts); (ii) community organizations, which are involved in service delivery and outreach activities; and the (iii) traditional education and health systems. Annex I proposes a 5-stage process for building these interagency linkages and planning and implementing comprehensive, integrated system of service delivery: getting together; building trust; developing a strategic plan; taking action; and going to scale.

28. The process of service integration typically involves: (i) a community needs assessment and an evaluation of services already available; this assessment can be carried out using a participatory methodology, such as the one which was used in Jamaica (Box 5); (ii) policy decisions on whether services should be offered only to at-risk youth or to all youth and families, to avoid the risk of stigmatization; and on whether programs should be targeted to young or older adolescents and their families; (iii) identification of types of services to be offered at different locations; (iv) flexible funding arrangements; and (v) establishment of a mechanism for sharing resources and information, which ensures confidentiality and greater attention to monitoring and evaluation.

Box #5: The *Participatory Urban Appraisal* methodology was used as part of a larger World Bank study on urban poverty in Jamaica to assess community perceptions of the relationships between poverty and violence and to identify ways that government, communities and individuals can work to reduce violence. The method emphasizes *local knowledge* and enables local people to make their own assessments and plans. The analytic framework assumes that: people's perceptions of poverty are not necessarily based on fixed income measurements but more frequently relate to *vulnerability*, at the individual, household and community levels; and vulnerability is linked to asset (e.g. human capital, social capital, productive assets) ownership. The relationship between poverty and violence is mediated positively or negatively through social institutions (family, local organizations). The study revealed both the complex relationships between assets and violence as well as the heterogeneous nature of violence. Annex II contains some of the salient findings stemming from this study.

Program Evaluation

29. Policy makers and service providers increasingly want to know what programs accomplish, what they cost and how they should be operated; and they want to base these decisions on hard data and evidence. A background paper commissioned for the preparation of the proposed Child and Youth Development Project reviews the process of developing evaluation designs for youth-serving programs, signals common pitfalls, identifies constraints to be considered and presents ideas for solving potential problems.²⁷ Burt and Resnick (1992) also provide a comprehensive assessment of evaluation issues for at-risk youth.²⁸ The following paragraphs summarize some of the key evaluation issues related to youth-serving programs and the options facing policy makers and service providers.

30. Evaluation of youth-serving programs is challenging because it addresses a wide diversity of problems and often includes multiple agencies and clients, changing over time to meet shifting needs. The specific issues associated with applying research methods to the kind of programs that serve at-risk youth are summarized below:

- *Defining program participation and unit of analysis* Participation in youth programs is difficult to define as many programs have flexible entry and exit points. Another issue relates to whether to count the gains made by indirect program beneficiaries, such as parents, boyfriends/girlfriends. Experience has shown that participants should be followed from point of entry and all major program activities should be tracked.
- *Evaluating the relationship between participation and outcomes* Assignment to treatment groups in many programs is based on individual need and is not random, with the higher problem youth receiving the most intensive services. This renders comparisons of outcomes to nonusers or to less frequent users inappropriate. Data on risks and needs of participants should therefore be collected at intake for use in pre-post design. Evaluations of service integration programs face additional challenges:
- *Tracking the services received by participants* Documenting participation of referred clients is essential to determine the degree of integration but is time consuming and difficult, requiring written agreements on information sharing.
- *Developing common agreements among agencies on program goals* It is essential to generate a consensus prior to program start-up amongst the agencies on the programs' goals and strategies.
- *Documenting service delivery by multiple agencies* A system for collecting data on who received what type and amount of service needs to be developed early in the planning process.
- *Measuring effects of the service delivery system* Evaluations need to document the extent to which services have been integrated.

27. Harrell, A., Evaluating Programs for Vulnerable Children and Youth. Urban Institute, November 1995.

28. Burt and Resnick, Youth at Risk: Evaluation Issues, Urban Institute, 1992.

31. Policy makers and service providers must first take a decision on whether program evaluation is justified, feasible and likely to provide useful information. The types of questions to be considered are included in Annex III. Subsequently, an appropriate evaluation design should be selected based on the audience to be reached and the types of questions to be answered. Annex IV provides a "decision tree" for identifying which types of impact designs are most suitable under different circumstances. Below are some general guidelines based on experience with exemplary evaluations:

(i) All successful programs include *performance monitoring*, which provides information on the extent to which objectives are being attained in comparison to program targets.

(ii) *Non-experimental evaluations* are often conducted by program staff drawing on service

records and/or client surveys. These evaluations examine changes in levels of risk or outcomes among program participants but do not include control groups. They include before and after comparisons; time series designs based on repeated measures; panel studies based on repeated measurement of outcomes on the same group; and post-program cross-sectional comparisons of participants. Non-experimental evaluations are relatively easy and inexpensive to conduct but have a number of shortcomings: designs can not estimate the full impact of the program compared to no service at all; designs can not control for the effects of developmental changes that would occur without the program; and extent to which results can be assumed to apply to other settings is limited.

Box 6: *Children at Risk Program*

This 6-city program aims to prevent drug abuse and drug selling and to foster positive and healthy development of 11 to 13-year olds who face multiple disadvantages (poverty, crime, family violence, drug addiction, and/or child abuse) in high-risk neighborhoods. The program relies on case managers to develop service plans for each youth and their family and provide follow-up. Each project site offers a core model of program interventions: case management services; family services; educational support; after-school programs; mentoring; and collaborative services with juvenile court system. A special effort has been made to establish a close partnership between local police and community social service agencies. The use of a case management system coupled with the creation of a network of services have proven to be critical elements in the initial success of the program. At the end of the first year, participants had a lower number of contacts with police (about 40 percent less) and with juvenile court (about 50 percent less) than the control group; and showed improvements in school performance (82 percent promotion rate compared to 70 percent in control group). Programs were also considered successful by the communities in which they operated, as illustrated by the fact that they were able to secure additional funding beyond the initial 3-year start-up phase. The cost per youth is estimated at US\$2500, which represents roughly 40 percent of the annual cost of secondary education in the U.S.

(iii) *Experimental* and *quasi-experimental evaluations* are often used to establish that funds are well invested, and that the program is making a contribution to the well-being of the clients served. These evaluations are used to answer questions about the impact of the program, by comparing outcomes *with* and *without* the program.

- *Experimental design* are considered the "gold standard" in impact evaluation. However, they are not always ideal in real life settings, either because an experiment is not feasible or random assignment to treatment and control groups raises ethical issues (i.e. denying essential services). Other considerations include their high cost and the potential problem of attrition (i.e. difficulties in tracking control group members). The evaluation of the Children at Risk Program described above (box 6) is a good example of an experimental design which involved a rigorous design permitting strong conclusions but proved very costly (over US\$2.0 million or roughly 16 percent of total project cost). Annex V presents a logic model used in the evaluation of the program, which builds on the conceptual framework presented in the previous section.

- *Quasi-experimental designs* also compare outcomes for program participants to those for comparison groups. The critical difference is that the decision on who receives the program is not random. The use of non-equivalent control groups require attention to rule out competing hypotheses regarding outcomes. Controls for maturation, history and selection may involve, respectively, selecting a sample that includes multiple age cohorts; collecting data in similar localities that lack the program or applying a statistical model that controls for biases in selection of program participants.

(iv) *Cost studies* are usually conducted in combination with an impact evaluation, although performance monitoring can address related questions of program effectiveness and efficiency.

(v) Quantitative analyses should also be complemented with qualitative and observational methods, such as *ethnographic studies*, which are often used to address process evaluation questions. While these methods are often criticized as lacking validity, they actually enhance validity of interpretations of more quantitative results, and are particularly important for youth-serving programs.

32. Two practical lessons learned from program evaluation include:

(i) Program staff should not be expected to conduct evaluations on top of their regular duties; experienced outside evaluators should work in collaboration with program staff to help them understand in 'non-technical' jargon the benefits of the evaluation, to involve them in key decisions, and to enlist their support and cooperation.

(ii) Evaluators need to recognize and work with the particularities of the program, including potential difficulties about random or quasi-experimental designs.

VI. SUMMARY AND CONCLUSIONS

33. Recent socioeconomic developments in Latin America have resulted in profound effects on youth: increased vulnerability to poverty; higher proportion living in single-headed households; mounting pressures to supplement family incomes; and declining socialization capacity of families, schools and community institutions. Large numbers of youth live in marginalized neighborhoods characterized by economic problems, crime and the disintegration of traditional forms of social cohesion. There has been a decline in women's time to care for young children, provide a conducive environment for adolescents and participate in community-based activities that are critical to strengthening social capital. While resilient youth will emerge from this vicious cycle of poverty, others will require special assistance to achieve the same opportunities for advancement in school, the labor market and personal development as those who do not face similar hardships.

34. It is important to recognize that youth face a continuum of risks and needs at various stages of the life cycle and are not a homogenous group. For younger adolescents (10-14), the overriding priority is to improve school performance and retention, which will ultimately preempt other problems, such as premature entry into the labor market, delinquency, addiction, and teenage childbearing. For older adolescents (15-19), the key concerns are generally related to ensuring a smooth transition from school-to-work and to integrating life-option and income-generation activities in the delivery of health prevention and promotion programs. For all youth, it will be important to instill critical thinking; enhance self-esteem; and encourage participation in program design and execution. Programs need to consider gender differentials in their design and evaluation, recognizing that many of the issues affecting youth in Latin America strike disproportionately young women (e.g. school drop out; early entry into the labor force; teenage pregnancy; prostitution) and run the risk of fostering the intergenerational reproduction of poverty.

35. This paper has established rationales for investing in youth which are based on the following goals: (i) alleviating poverty and strengthening social capital (i.e. family environments, community networks and positive role models), which often hinders young people from reaping the benefits of human capital investments; (ii) avoiding negative externalities associated with risky behaviors (e.g. juvenile delinquency, drug addiction, school drop-out and teen pregnancy); and (iii) achieving social justice, guaranteeing human rights, and facilitating social and political integration. The principal message is that investing in at-risk youth will lead not only to high individual returns but also high returns for their families and society.

36. A conceptual framework has been presented which can be used to categorize information and decide on relative priorities. The framework does not attempt to establish causality between environmental conditions, such as poverty, neighborhood environment and family dysfunction (*risk antecedents*), early signs of problems (*risk markers*), and *problem behaviors and negative outcomes* (school drop-out; delinquency; addiction; and teen pregnancy), even though it suggests a strong association between these variables. The main conclusion derived from the framework is the need for *early detection and prevention*. It is suggested that for *targeting* purposes a combination of risk antecedents and risk markers be used, to make it manageable and financial feasible to reach the target population. The decision on target populations will obviously vary across and within communities and countries, and be highly dependent on resource availability.

37. ***What are the ingredients of success in youth-serving programs?*** The review of two dozen international youth-serving programs has suggested that there are no easy blueprints for working with at-risk youth. Moreover, deficiencies in cost data and a dearth of information on the benefits side make it analytically difficult to determine which service delivery models are the most cost efficient and which ones yield the highest benefit/cost ratios. Nevertheless, a number of generic lessons learned can be cited:

- ***Case Management*** The use of case management systems (i.e. interdisciplinary groups of professionals who oversee the needs of youth) allow for the provision of individualized care and addressing the interdisciplinary needs of youth. Some programs have also combined case management with computerized management information systems, which allow for monitoring needs and program outcomes.
- ***Community-wide Multi-agency Collaborative Approaches*** An important feature of successful programs has been the reliance on inter-institutional networks or umbrella organizations, which tap the resources available within communities and organizations, in order to take advantage of potential economies of scale and multiplier effects. Community-based approaches tend to be more flexible, responsive and accessible.
- ***Private Sector Involvement*** Fostering private sector participation is another key ingredient for success. This can involve community participation in the design and implementation of programs (e.g. use of volunteers from the business sector to provide training and to organize fund-raising) or parental and peer participation in programs. Programs have demonstrated the importance of establishing and maintaining strong ties to the private sector, both to generate higher placement rates and to raise additional funds.
- ***Youth Participation and Empowerment*** Youth participation in the design, implementation and evaluation of programs has been shown to be essential to their success, particularly for programs catering to older adolescents. Early involvement of youth and their families/communities at the design and planning stage has been shown to be critical in establishing a dialogue, enlisting their support, and facilitating sustainability. Programs use creative strategies (e.g. theatrical productions) and participatory methodologies to empower youth and involve them in management decisions. Peers are often used as role models and mentors in successful programs to increase acceptability of messages. Some programs include assistance for empowering youth to assess their needs, identify remedial strategies, and take an active role in their implementation.
- ***Replicability*** Replicating and scaling up exemplary programs is a difficult task and will probably not be feasible in many cases, particularly for community-based efforts. The emphasis should therefore be on adopting successful "elements" of these programs to other environments. Experience has shown that programs which have successfully scaled up have tended to have decentralized management structures (i.e. services provided through locally autonomous affiliates or sub-contracting arrangements) with a central body responsible for oversight, advocacy and goal setting.

- ***Sustainability*** The sustainability of programs serving at-risk youth depends on a number of factors: diversification of funding sources to include a mixture of private and public support; participation of the local community, including the business sector; involvement of youth and their families; and advocacy efforts to generate broad based support from local communities, governments and donor agencies.

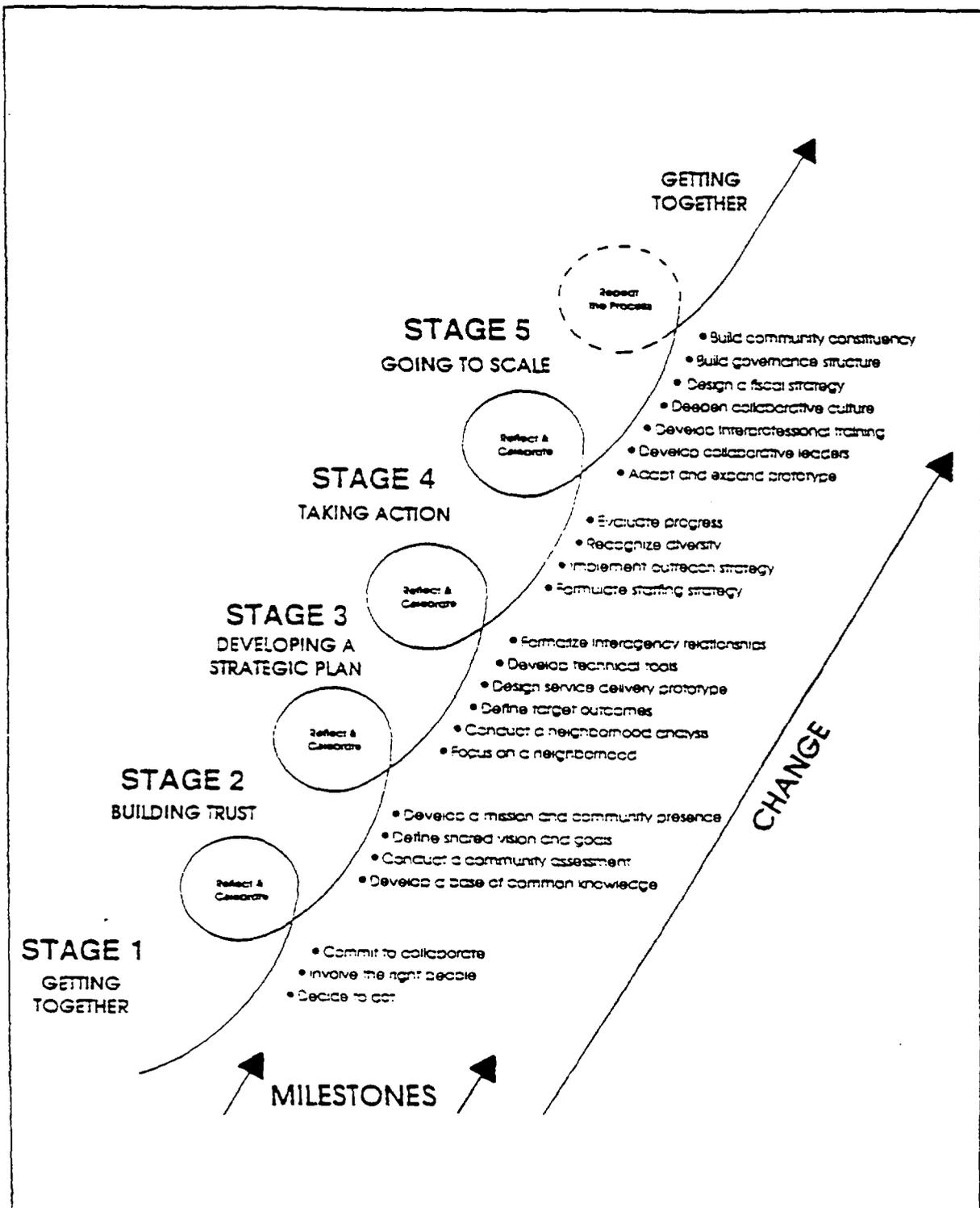
38. ***What challenges lie ahead?*** Policy makers and program practitioners face a number of important challenges:

- ***Strengthening quality and coverage and recasting the focus of youth-serving programs*** As mentioned above, youth-serving programs often reach small numbers of youth, are of highly variable quality, and tend to focus on tertiary attention. The challenge is to set minimum standards, establish management information systems, provide sufficient resources, and train staff who are sensitive to the special needs of at-risk youth as well as to reorient services towards primary prevention. Early detection will be essential to reach at-risk youth. In later periods of the life cycle it becomes exceedingly difficult and costly to reverse anti-social behaviors.
- ***Providing a conducive environment for youth*** This would include measures and/or investments which raise income levels of families, increase the incidence of intact and supportive families, and improve overall living conditions in the poorest neighborhoods.
- ***Building tripartite partnerships*** Given the magnitude and complexity of youth problems in many developing countries it will be critical to reinforce tripartite partnerships between Government (central, regional and local levels); youth and their families; and local communities, including the business sector. Governments have important funding, facilitating and normative functions (e.g. setting standards, establishing information systems, monitoring and evaluating results). They often play a critical role in identifying, designing and monitoring promising pilot programs, which can have an important multiplier effect. Youth and their families have a stake in the outcomes. Local communities can foster political and financial support. The participation of these various stakeholders will be essential and should be mobilized at an early stage in program design. Focus group discussions and participatory appraisal methodologies can be utilized to hold brainstorming sessions with beneficiaries and their families, government representatives, and private sector stakeholders (NGOs, foundations, local businesses; universities, research centers) to seek their opinions and to enlist their support.
- ***Improving information for decision making*** One of the most important challenges for policy makers and administrators of youth-serving programs is to improve the information base for decision making. The justification for expanding, replicating or strengthening programs needs to be based on sound analytic evidence. There is a need to establish and maintain information systems which collect benefit and cost data that can determine the effectiveness, cost-efficiency, and benefit-cost ratios of program interventions. Depending on the audience to be reached, the types of questions to be

answered, and the resources available, program managers must decide on the most appropriate evaluation techniques to be used. Additional research is also required on: the needs and preferences of out-of-school youth, who represent a substantial number in many developing countries; the capabilities of local groups (e.g. NGOs, community-based organizations, women's groups, religious organizations) to participate in youth-serving programs; and the factors explaining the ability of resilient youth and families to emerge from the vicious cycle of poverty and on ways which programs can use members of resilient families as partners in youth-serving programs.

ANNEXES

A Five-Stage Process for Change



Listing of Problems by Community Members (% within each community)

Problem (%)	Community				
	Greenland	Campbell Town	Park Town	Zinc City	Maka Walk
	Intra-City Location				
	Inner-city Kingston	Inner-city Kingston	Peri-urban Kingston	Poor neighborhood	Inner-city
Crime and Violence*	20	22.2	10.4	6.8	14.7
Labor	40	27.8	20.7	28.8	22.2
- access to employment (including area stigma)	20	16.7	17.2	15.2	18.5
- access to training	20	11.1	3.5	10.2	3.7
- productive capital (tools etc.)				1.7	
- credit				1.7	
Human capital	20	2.8	17.2	25.4	14.9
- food/survival	20	2.8	15.5	10.2	3.7
- health				5.0	7.5
- education			1.7	10.2	3.7
Productive Assets / Physical Infrastructure	10	19.4	32.8	23.7	22.2
- housing	10	5.6	1.7	8.5	3.7
- water and sanitation		5.6	6.9	1.7	3.7
- drainage/gullies			5.2		
- electricity			1.7	1.7	
- telephone		2.6	5.2	6.7	
- transport			3.5	1.7	3.7
- other		5.6	8.6	3.4	11.1
Household Relations	0	5.6	3.4	3.4	7.4
- teenage pregnancy		2.8	1.7		7.4
- happiness in the home				1.7	
- family structure breakdown		2.8	1.7	1.7	
Social Capital	10	22.2	15.5	11.9	18.6
- police brutality/prejudice/cooperation	10	2.8	5.2	3.4	3.8
- political representation		2.8	1.7	3.4	
- equality before the law/society		2.8	3.4		
- lack of unity		5.5			
- lack of leadership/community organization		8.3			
- moral decay/discipline of youth			5.2	5.1	14.8
TOTAL	100	100	100	100	100

PUA field notes from Greenland, Campbell Town, Park Town, Zinc City, and Maka Walk

* Tides in bold were developed for purposes of categorization at the analysis stage

Source: Moser and Holland, A Participatory Study of Urban Poverty and Violence in Jamaica, Urban Development Division, World Bank, December 1995

Summary of Five-Stage Process

Stage One: Getting Together. In this stage, a small group comes together to explore how to improve services for children and families. They identify other community representatives with a stake in the same issue, make a joint commitment to collaborate, and agree on a unifying theme. They also establish shared leadership, set basic ground rules for working together, secure initial support, and determine how to finance collaborative planning.

Stage Two: Building Trust and Ownership. Next, partners establish common ground. They share information about each other and the needs of families and children in their community. Using this information, they create a shared vision of what a better service delivery system would look like, and they develop a mission statement and a set of goals to guide their future actions.

Stage Three: Developing a Strategic Plan. Here, partners begin to explore options that flow from their common concerns and shared vision. They agree to focus on a specific geographic area, and they design a prototype delivery system that incorporates the elements of their shared vision. Partners also develop the technical tools and interagency agreements needed to put their plan into action. During this stage, the group may go back to preceding stages to bring in new partners and to continue building ownership.

Stage Four: Taking Action. Partners begin to implement the prototype. They use the information it provides to adjust the policies and practices of the organizations that comprise the prototype service delivery system. Partners design an ongoing evaluation strategy that helps them to identify specific systems-change requirements, make mid-course corrections, and measure the results.

Stage Five: Going to Scale. Finally, partners take steps to ensure that systems-change strategies and capacities developed in the prototype are adapted, expanded, and recreated in locations throughout the community where profamily services are needed. To do this, partners continue to develop local leadership, strengthen staff capacity by changing preservice and inservice training, and build a strong constituency for change.

ANNEX II-B

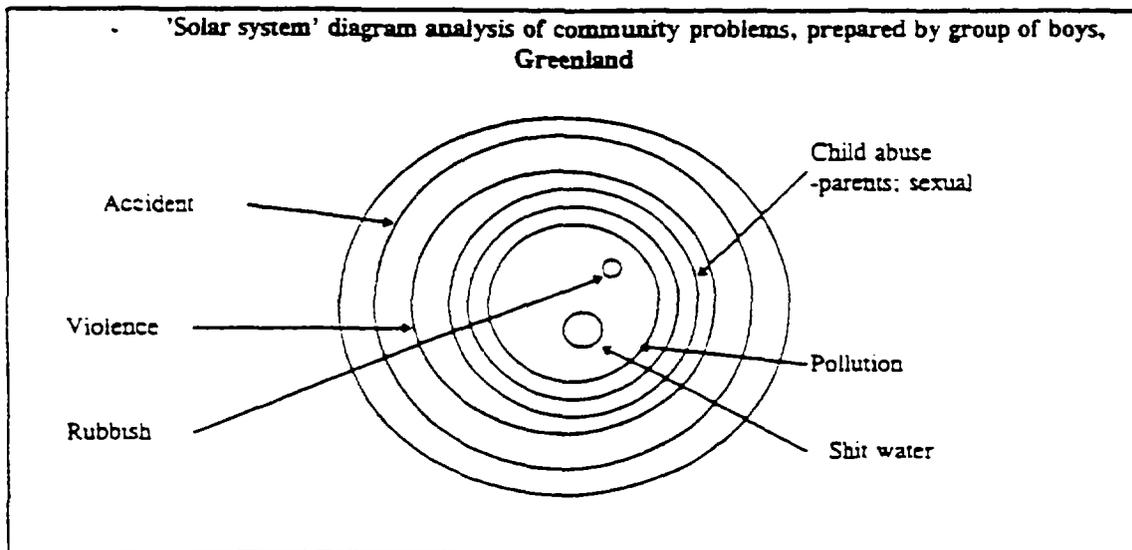
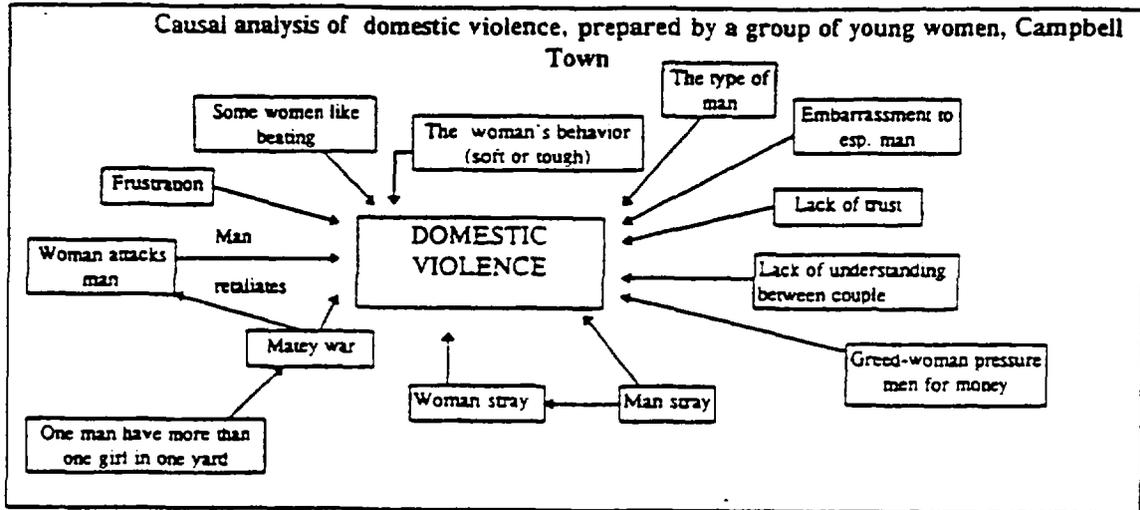
**Listing of Perceptions of Types of Violence in Four Urban Communities
(by % within each community)**

Type of violence (%)	Community			
	Intra-city location			
	Inner-city Kingston	Inner-city Kingston	Peri- Urban	Secondary City
	Greenland	Campbell Town	Park Town	Zinc City
Political*	3	10	0	20
- political	3	10		13
- mercenary				7
Drugs	8	10	0	7
- drug	2	10		7
- cocaine	6			
Gang	32	30	22	7
- gang war	5			7
- war over guns	16	20	22	
- knives/ bottles/stones	11	10		
Economic	11	20	11	40
- housebreaking	3			7
- thieving /stealing	8	20	11	20
- contract				13
Inter-personal	38	10	56	26
- rape	11	10		7
- verbal abuse	8		11	
- physical abuse	11		11	
- tenant			11	
- pickney war				7
- matey war	8		11	6
- war over women			12	6
Domestic	8	20	11	0
- male- female	8	10	11	
- adult- child		10		
Total	100	100	100	100

PUA field notes from Greenland, Campbell Town, Park Town and Zinc City

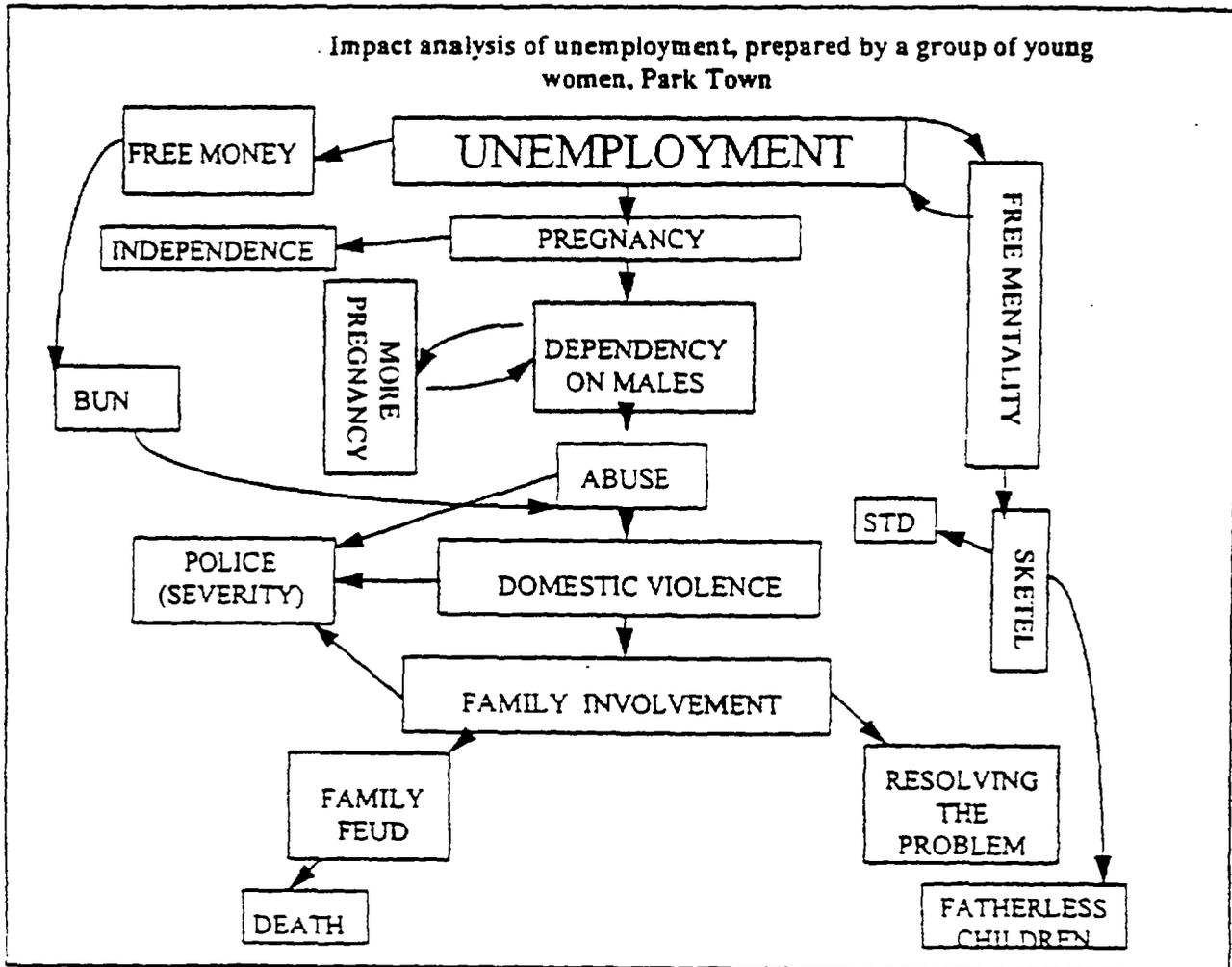
* Titles in bold were developed for purposes of categorization at the analysis stage

Source: Moser and Holland, A Participatory Study of Urban Poverty and Violence in Jamaica, Urban Development Division, World Bank, December 1995



Source: Moser and Holland, A Participatory Study of Urban Poverty and Violence in Jamaica, Urban Development Division, World Bank, December 1995

ANNEX II-D



Source: Moser and Holland, A Participatory Study of Urban Poverty and Violence in Jamaica, Urban Development Division, World Bank, December 1995

Aggregated listing of "dream community" solutions

Dream community characteristics	Focus Group				
	Children	Young men	Young women	Middle aged and elderly	Total
Unity/love/togetherness	1	5	3	9	18
End violence/gang war/remove guns/stop attending funerals		5	3	8	16
Respect/upliftment/look to Marcus Garvey/prayer	1	5	2	4	12
Attitude/discipline/family stability		2		5	7
Remove party politics/ get an apolitical leader		4	1	1	6
Remove area stigma		1	1	2	4
Equal rights		2	1		3
Greater involvement from politicians		1	1	1	3
Strong leadership				3	3
Move out		1		1	2

Source: PUA field notes from Greenland, Campbell Town, Park Town, Zinc City and Maza Walk

Aggregate listing of community recommendations for building social capital

Type of Solution Social Assistance Intervention	Focus Group				
	Children	Young men	Young women	Middle aged and elderly	Total
Community-based activities: - community/youth/daycare centers - youth projects - drama group - literacy classes - voluntary work/self help - Citizen's Associations etc./Neighborhood Watch		6 4	4	5 2 1 2 7	35
Safe centers and staff for counseling around violence: - parenting skills to deal with children - youth involved with gun violence - community relations - drug addiction - family planning		2 1 1	1 1	4 1 1 1	14
Program to improve relations with the police/reduce police harassment	1	3	1	2	7
Soup kitchen/lunch money/school fee assistance			1	2	3
Military training for youth	1			1	2
Job placement programs that teach youth how to present themselves for jobs				1	1
Prisoner rehabilitation programs				1	1
Return subsidy on basic food items				1	1

PUA field notes from Greenland, Campbell Town, Park Town, Zinc City and Maza Walk

Source: Moser and Holland, *A Participatory Study of Urban Poverty and Violence in Jamaica*, Urban Development Division, World Bank, December 1995

Aggregate listing of community recommendations for project intervention

Type of Solution	Focus group				Total
	Children	Young men	Young women	Middle aged and older	
Social infrastructure projects					
Training/Training Center	1	9	6	11	27
Education/schools/school equipment		5	3	5	13
Sport's fields/playing area/sports center for both boys and girls - provision, rehabilitation and equipping		4	1	4	9
Health clinic/nurse/family planning			3	2	5
Police station			1		1
Economic Infrastructure Projects					
Provide housing		2	2	7	11
Water supply and sanitation		1	2	4	7
Community rehabilitation of rented/captured housing and zinc fences, and reclamation of open lots		1	1	5	7
Telephone installation		2	1	4	7
Street repairs		1	2	2	5
Drainage/gully repair		2	2	1	5
Reliable garbage collection		2	1	2	5
(Legal) electricity			1	3	4
Fix up physical environment/'war zone'	1			1	2
Street light installation				2	2
Systems to ensure transport can move through commentates				1	1
Income generating projects					
Provide work		8	5	13	26
Program to provide incentives for business to work in inner-city areas		1	1	1	3
Community level workshops, e.g. welding				1	1
Shopping center				1	1
Business center				1	1

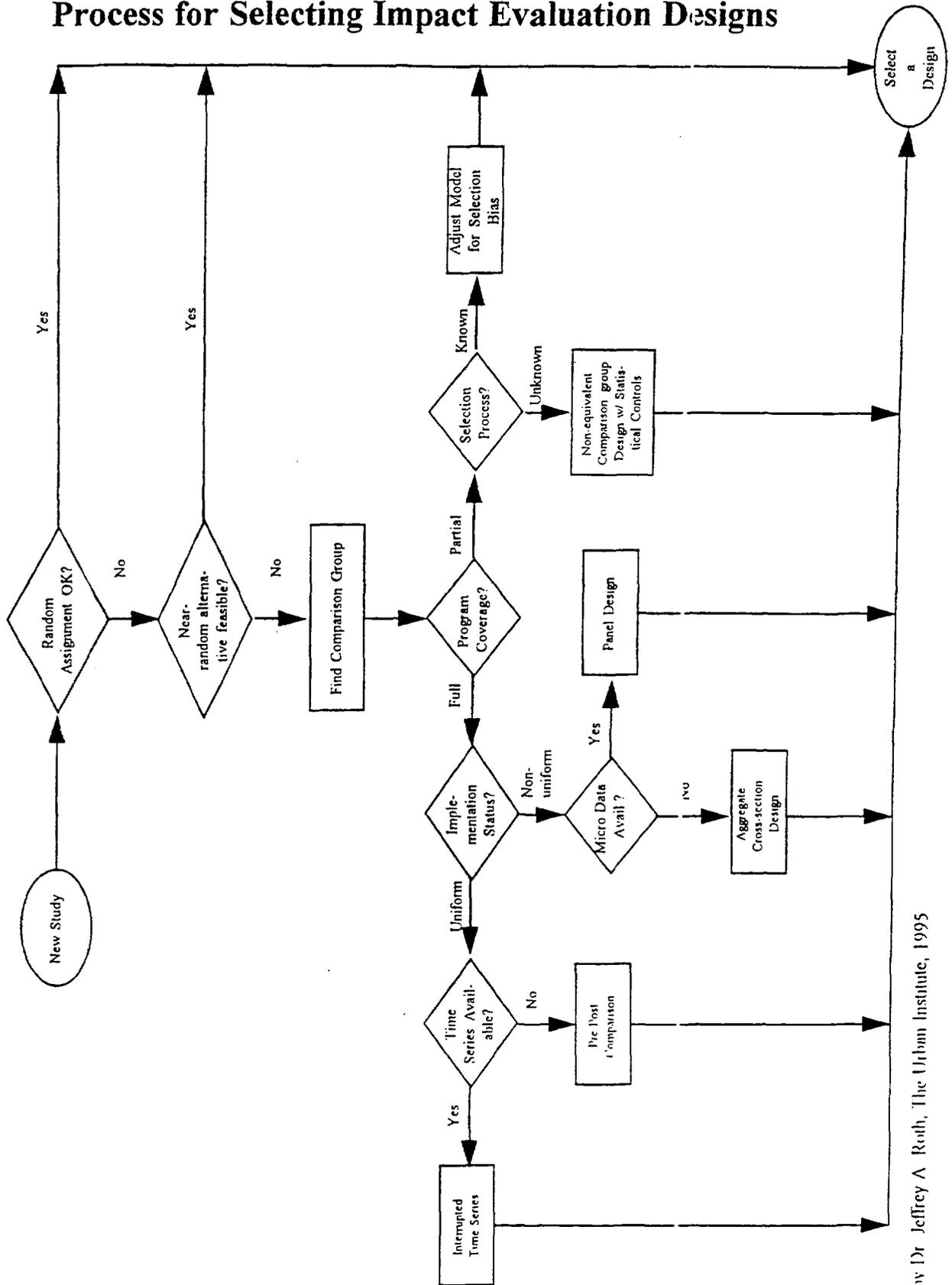
Source: Moser and Holland, A Participatory Study of Urban Poverty and Violence in Jamaica, Urban Development Division, World Bank, December 1995

ANNEX III

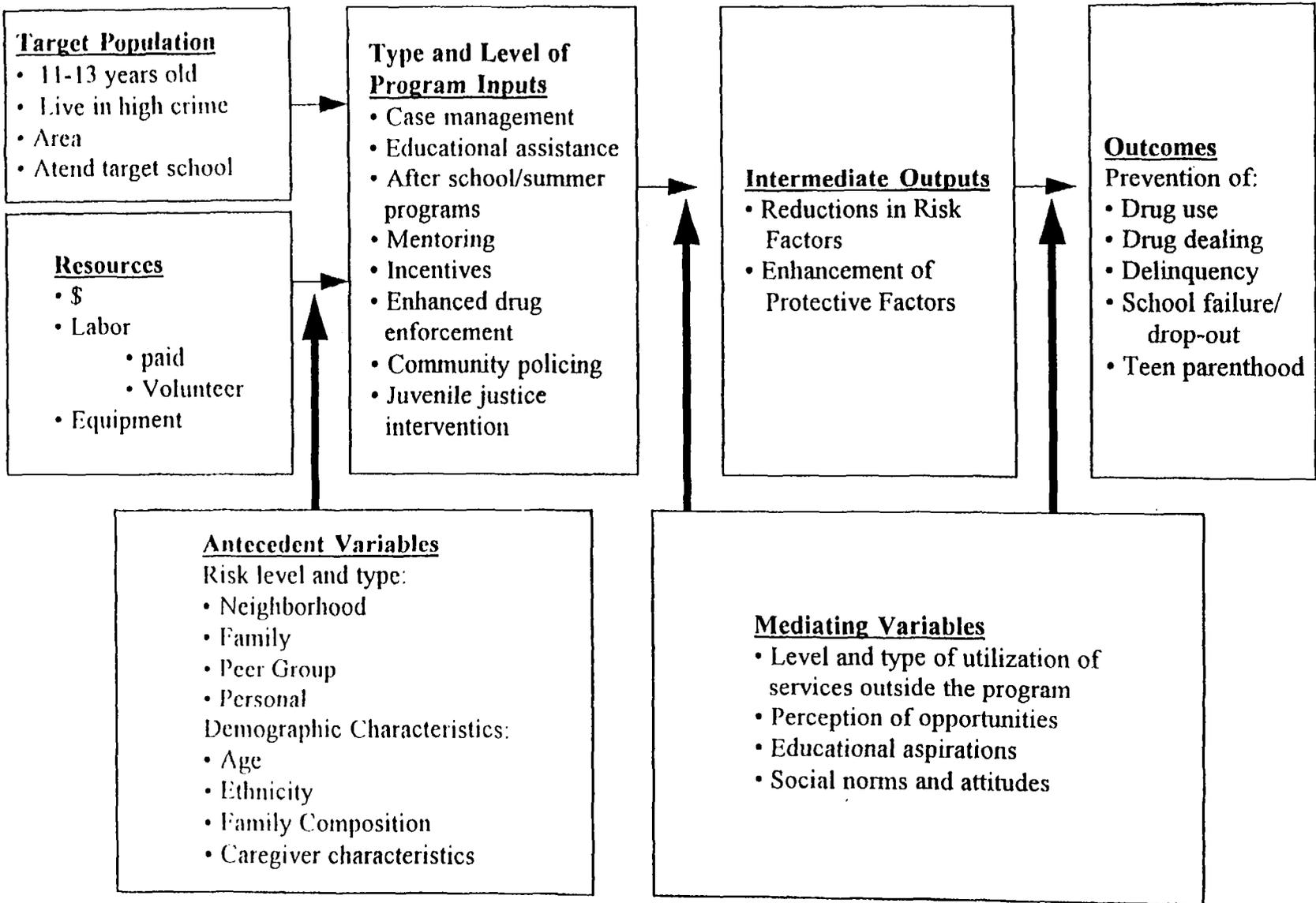
Questions to be considered in an evaluability assessment include:

- Does the program's logic appear to adequately lead to the program's planned outcomes? If program goals are unrealistic or the intervention strategies not well grounded in theory, then evaluation is not a good investment.
- What kinds of data will be needed, from what number of subjects, and what data are likely to be already available? Evaluations should be designed to maximize the use of available data, as long as these are valid indicators of important concepts and are believed to be reliable. Available data may, for example, include government statistics, individual and summary agency records and statistics and information collected by researchers for other studies.
- What resources and assets are available -- money, time, expertise, community and government support? Are there any factors that limit or constrain access to these resources?
- Can the evaluation be achieved in a time frame that is likely to permit the findings to be useful in making program and policy decisions by federal, state and local officials?
- To what extent does evaluation information already exist somewhere on the same or a closely related intervention? The answer to this question can have important implications for action. Any successful previous attempts may yield promising models for replication. Lessons learned from previous unsuccessful attempts may inform the current effort. If sufficient evidence already exists from previous efforts, the value of a new evaluation may be marginal.
- To what extent are the findings from an evaluation likely to be generalizable to other communities, such as by expanded use of the program intervention being evaluated? Are there unique characteristics of the projects to be evaluated that might not apply to most other projects?

Process for Selecting Impact Evaluation Designs



Prepared by Dr. Jeffrey A. Roth, The Urban Institute, 1995



Logic Model Used in Evaluation of the Children at Risk Program

Other Reports in the LASHC Series

- No. 1: Children of the Poor in Latin America and the Caribbean by *J. van der Gaag and D. Winkler*, July 1996 (available in Spanish translation)
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